



Form 900ME

PAYMENT VOUCHER FOR MAINE INCOME TAX WITHHELD

Maine Revenue Services
P.O. Box 1061
Augusta, ME 04332-1061



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0706510

Withholding Account Number: _____	1. Amount Remitted: _____
Business _____	2. Quarter Begin Date: _____
Name: _____	Quarter End Date: _____
3. Date Wages/Non-wages Paid _____	Amount Withheld _____
_____	Contact Person _____
_____	Contact Person's Telephone Number _____
_____	MAKE CHECK PAYABLE TO TREASURER, STATE OF MAINE

Cut along dashed line



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